

IN THE PROBATE DIVISION, CIRCUIT COURT, ST. LOUIS COUNTY, MISSOURI

In the matter of

Respondent

No. _____

**PETITION FOR APPOINTMENT OF A GUARDIAN
AND CONSERVATOR**

Comes now _____ and states that the above named respondent,
age _____, whose domicile is St. Louis County, Missouri, and whose present residence and post office address is
_____, is incapacitated and
disabled.

Street Address City State Zip

The respondent owns property having an estimated value of:

Real Property - \$ _____ Personal Property - \$ _____

Has the respondent executed a durable power of attorney? _____

Petitioner is the _____ of the respondent and requests that letters
(relationship)
of guardianship be granted to _____, whose address is

_____, and who is not now guardian or
Street Address City State Zip

conservator for any wards or protectees (except as follows):

(Name)

Street Address

City State Zip

[For Guardianship of Person or Conservatorship of Estate – per 475.060(10) R.S.Mo. 1983].

The reasons why the appointment of a guardian is sought are: _____

[For Guardianship of Person Only – per 475.060(9) R.S.Mo. 1983]. The specific physical or mental conditions which prevent the respondent from being able to care for person are: _____

[For Conservatorship of Estate Only – per 475.061(1) R.S.Mo. 1983]. The specific physical or mental conditions which prevent the respondent from being able to manage financial resources are: _____

The following are listed pursuant to the provisions of 475.060 and 475.075 R.S.Mo. 1983:

NAME & RELATIONSHIP	AGE (if applicable)	POST OFFICE ADDRESS (Include Zip Code)
Spouse (indicate if deceased)		
Mother (indicate if deceased)		
Father (if deceased)		
Son/Daughter (Grandson/Granddaughter)	Age	
Son/Daughter (Grandson/Granddaughter)	Age	
Son/Daughter (Grandson/Granddaughter)	Age	
Son/Daughter (Grandson/Granddaughter)	Age	
Nearest Known Relative Relationship -		

NOTE: If the respondent has no spouse, mother, father or children, the names of the nearest known relatives who are over the age of eighteen must be listed above.

Person having custody of respondent	
Name of any guardian/conservator in this or any other State	

Petitioner prays that a hearing and inquiry be held and the court appoint _____

Guardian of the Person and Conservator of the Estate for the respondent.

Petitioner states that the foregoing is made on this ____ day of _____, _____, under oath or affirmation, and its representations are true and correct to the best of petitioner's knowledge and belief, subject to penalties of making a false affidavit or declaration.

Attorney's Signature

Petitioner's Signature

Attorney's Name (Typed)

Petitioner's Name (Typed)

Street Address

Street Address

City State Zip Code

City State Zip Code

Phone Number With Area Code

Phone Number with Area Code

Missouri Bar Number

Attorney's Signature

Petitioner's Signature

Attorney's Name (Typed)

Petitioner's Name (Typed)

Street Address

Street Address

City State Zip Code

City State Zip Code

Phone Number With Area Code

Phone Number with Area Code

Missouri Bar Number

Serve notice on respondent at: _____

Send Fee Bills to: _____ Publish Notice of Letters in _____

Minute Notices to: Attorney _____ Fiduciary _____